	FORM R-B CITY OF DAY	-	ember or Fiscal Year E				
		<u> </u>	Business Name	Federal ID#			
	DBA Address Your phone #						
		Your phone #		l			
			City/State/Zip	Preparers phone #			
	Do you have an employee withhold	•				(F. 0	"" II O I)
		Dayton Return last year?		D MUCT	h	,	ffice Use Only)
	Federal Filing on form 1120 112	20A 1120S 11	20X 1065	Documentation MUST	be attached (Do not re	port Schedule C o	DATE STAMP
1	TOTAL Taxable Income						1
2	TOTAL TOTAL	Items	NOT deductible				2
3		Items NOT taxable					3
	inter Excess of line 2 or 3 (Show negative amounts in page 1)						4
5	Adjusted NET income (Line 1 plus or minus Line 4)			,			5
6	Amount allocable to Dayton				6		
7	AMOUNT SUBJECT TO DAYTON TAX 7						
8	Dayton Tax Due @ 2.25%						8
9		Estima	ated Payments				9
10		Prior Years	overpayments				10
11		TO	TAL CREDITS				11
12	Penalty		and/or Interest		Total Penalty/Int		12
13	BALANCE DUE (Subtract L			12 as required)			13
14	IF OVERPAYMENT		< REFUNDED		< CREDIT TO NEXT	ΓYEAR	14
15	ESTIMATED TAX for year		ESTIMATED INCOME		Dayton Tax @ 2.25% =		15
16				1st qua	arterly estimated due April 15th		16
17					Credit from Prior Year		17
18	TOTAL DUE (Add Line 40		11 in a 40	Balai	nce of Quarterly Payment Due		18
19	TOTAL DUE (Add Line 13 _		d Line 18)			19
		SCHEDULE X Reconci		come Tax Return (ORC 718	•		
	ITEMS NOT DEDUCTIBLE		ADD	1	OT TAXABLE	DEDUCT	
	Capital Losses - IRC 1221/1231 only			1	1/1231 property dispositions	1050	
	xpenses incurred in the production of non-taxable income come Taxes, City and State (If Deducted as Expenses)			except to extent gains apply as described in IRC 1245/1250 L Federally reported intangible income such as, but		1250	
	et Operating Loss Deduction per Federal Return			not limited to interest, dividends, patent & copyright inco		Omo	
	syments to Partners/Officers per Federal form 1065/K-1		M Amount of Federal Tax Credits to the extent they		one		
	etirement Plan Payments (Keogh, IRA, Tax Sheltered Annuity)		have reduced corresponding operating expenses				
	ortion State of Ohio Franchise Tax based on Income		N Not Previously Deducted Sec 179 Expense				
	ental Activities (Partnership, S-Corp, LLC, etc.)		O Other Items not Taxable (explain)				
	Other Items not Deductible (explain)	,			(onpiani)		
	Total Lines A through I			P Total Lines K through	0		
CHE	DULE Y (proration of Schedule C income for no	on-residents only)		А	В	С	
				Located Everywhere	Located in Dayton	Percentage (B/A)	
Step 1:	Average Value of Real & Tangible Personal F	Property					
Gross	Annual Rents Paid Multiplied by 8						
Tota	Total Step 1						
Step 2:	tep 2: Gross Receipts from Sales Made and/or Work or Services Performed						
	Wages, Salaries and Other Compensation Pa	aide					
Total P	ercentages (From Column C)						
Averag	e Percentage (Total Percentages / Number of	Percentages Used)					
READ	BEFORE SIGNING: The undersigned declare	this return and attached	schedules to be a true a	and complete return for the ta	axable year stated and that the	figures used herein are	the same as used for Federa
	rposes, adjusted to the requirements of the Day	•	•	rn. I understand that if I ar	n under withheld in the follow	ving tax year (by \$100.	00 or 10% of tax due) I will I
-	ed Penalties and Interest if I fail to make req	• •		v =			
f this	return was prepared by a tax profession	onal, may we contac	t them directly?	Yes ⊔ No			
Гах F	Preparer Signature	Та	x Payer Signature			Date	
Гах Р	Preparer Phone #					Date	
\4-''	Deture with DAVASENT DUE:		01. 61.7	DO D 015	0	4.0700	OF DAP
	Return with PAYMENT DUE to:	IC T		PO Box 643700	Cincinnati, OH 45264		
	Return with ZERO BALANCE DURENT WITH REFUND REQUEST		City Of Dayton City Of Dayton	•			

In the event your check is returned unpaid for insufficient funds or uncollected funds, we may electronically debit your account for the principal amount of the check.